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SUBJECT: HIV/AIDS: AMBASSADOR VISITS U.S. GOVERNMENT-SUPPORTED HIV/AIDS PROJECTS IN HAIPHONG

REF: Hanoi 2946

¶11. (SBU) Summary: During an October 29 trip to Haiphong, the Ambassador visited three HIV/AIDS projects supported by the President's Emergency Plan (EP) and met with city officials. Haiphong is Vietnam's fourth most-populous city and suffers from the country's second highest HIV incidence rate. Senior city officials described a number of HIV/AIDS awareness programs and public health measures they are taking to deal with the disease and outlined their anti-narcotics efforts. The director of a voluntary counseling and testing center described efforts to identify HIV-infected individuals, to refer them to care and also to prevent the spread of the virus to others. Participants in a support group for HIV-positive people identified as particular priorities changing public attitudes towards people living with HIV/AIDS and helping children of HIV-positive people. Finally, the manager of a center for injecting drug users (IDUs) described the center's efforts at risk reduction for its clients. End Summary.

¶12. (SBU) The Ambassador visited Haiphong, Vietnam's fourth largest city and a provincial-level administrative entity, October 29 for meetings with local officials, community leaders and religious workers (the Ambassador's discussions with religious leaders will be reported septel). Haiphong People's Committee Chairman Trinh Quan Su told the Ambassador that he is "delighted" that Vietnam had been chosen as part of the President's Emergency Plan (EP) and he pledged the Haiphong authorities' "strong cooperation" with the efforts of the United States and other donors to combat HIV/AIDS. Provincial Department of Health Director Nguyen Van Vy, also present at the meeting, elaborated on the province's efforts to combat HIV/AIDS. He seconded the Chairman's comments on foreign aid, saying that the health authorities seek to "mobilize communities" in their effort to fight HIV/AIDS and welcome USG assistance to Haiphong NGOs which are carrying this out. Haiphong initiated HIV/AIDS prevention efforts in 1989, which Vy said was "very early" for Vietnam.

¶13. (SBU) The city's greatest HIV threat comes from injecting drug users (IDUs), Vy continued. The province has "strong leadership" on HIV prevention, and the People's Committee has held three sessions solely to discuss prevention measures. In addition, the Provincial Party Committee had issued a resolution on HIV/AIDS prevention three years before. Through government awareness efforts, 90 percent of Haiphong residents are aware of the disease and 50 percent know how to take preventive measures. The city is now focusing on increasing HIV testing, strengthening safety measures during healthcare activities (such as testing donated blood), preventing mother-to-child transmission and providing syringes to IDUs in order to reduce HIV transmission. There are 6,300 individuals infected with HIV in Haiphong, and 1,100 local residents have died of the disease. The city has two facilities for treating the disease, each with 50 beds. Vy claimed that, as a result of the authorities' efforts, the rate of new cases is down 30 percent compared with previous years.

¶14. (SBU) Specifically addressing the spread of HIV/AIDS through drug users, Haiphong public security director Nguyen Binh Doan said that there are 4,000 IDUs in the Haiphong area, and that Haiphong has two treatment centers -- one for 300 addicts and a second for 200. One third of the people in these centers had entered voluntarily, Doan claimed. (Note: These drug rehabilitation and treatment centers, known as "06 centers," provide for the involuntary detention and treatment of repeatedly identified addicts. The 06 centers are essentially the only drug rehabilitation programs currently available in Vietnam. A large minority of residents are "voluntarily" admitted by themselves or, more commonly, by their families. End note.)

¶15. (SBU) The Ambassador said he welcomed cooperation with the Haiphong authorities in prevention and treatment efforts and noted that the President's Emergency Plan would potentially allow them to expand activities. He urged the

authorities to lend their support to USG efforts to bring medicines for AIDS treatment into Vietnam tariff-free, noting that this would allow a 15 percent savings which could be used in other efforts. Because being frank and open about the disease is important, the Chairman should speak out more publicly on AIDS, the Ambassador stressed. In fact, during a meeting the day before, Prime Minister Phan Van Khai had made a pledge to the Ambassador to raise his voice on HIV/AIDS (reftel). On the subject of rehabilitation centers, the USG shares the GVN's desire to stop the use of illegal drugs. However, we have a difference of opinion regarding the centers and are presently not able to work with them for policy reasons. Chairman Su closed the meeting by pledging to "personally speak out" on the danger of HIV/AIDS.

16. (SBU) At a LIFE-GAP Voluntary HIV Counseling and Testing Center (VCT), which is funded by the Centers for Disease Control and Prevention (CDC) in a cooperative program with the Vietnamese Ministry of Health (MOH), Project Director Dr. Tran Thi Thanh Thuy identified the main activities that the two-year-old program carries out. With a staff of eight trained counselors and three laboratory technicians, the VCT center has in its 23 months of operation counseled and tested more than 5,000 clients at high risk for HIV. Using a MOH-required standard test strategy requiring two visits, 90 percent of the center's clients returned for post-test counseling and were also referred to additional services if "indicated." Dr. Thuy explained that the center receives clients through referral cards placed in health facilities across the province and also gave additional cards to all visitors to pass to their acquaintances. Currently serving 200 to 300 clients per month, the numbers of visitors tend to be higher in the fall and winter, as well as after the center conducts advertising campaigns. Of those who have been tested, just over 22 percent were found to be HIV-infected, indicating that the services, which are free and anonymous (no name is reported to the Government), appear to be attracting higher risk clients. Some 76 percent of the positive tests were among drug users, but sexual transmission appears to be rising, Dr. Thuy noted.

17. (SBU) In addition to the VCT center, the CDC-funded program provides technical and financial support for an HIV/AIDS outpatient clinic attached to the provincial hospital; a community outreach program staffed by peer educators who work in high-risk neighborhoods to provide information, skills, condoms and referrals to IDUs and other vulnerable populations; and a program to detect and prevent mother-to-child transmission. This USG-funded project also supports monitoring rates of sexually transmitted disease infections among persons at high risk for HIV, tracks the connection between tuberculosis and HIV in order to both enhance identification of co-infection and better coordinate the two provincial programs and distributes condoms to persons with high HIV risk. Dr. Thuy noted that clients of the VCT site preferred the Vietnamese-produced condoms to the American condoms provided by the USAID Commodities Fund. Clients complained that the American condoms have an undesirable smell. The stigma against AIDS suffers remains strong in Vietnam and it is sometimes difficult to recruit employees to work in the project. In response to Ambassador's question, Dr. Thuy said that, with more funding, the center would like to expand its VCT and community outreach activities to more of Haiphong's districts, especially those in outlying areas.

18. (SBU) Mrs. Pham Thi Hue and four members of "Red Flame Tree," a support group for HIV-positive people, described for the Ambassador their efforts to raise awareness of HIV/AIDS in Vietnam. Mrs. Hue gives talks at schools and businesses, and said she was planning a trip to HCMC to speak at an Adidas factory the following day. Ha Minh Thao, Hue's husband and a continuing drug user, noted he has spoken to IDUs about HIV/AIDS. Most people have a basic idea about AIDS, Hue said, but "people are surprised to find out that someone who looks like me" is HIV-positive. Although the group has the support of local leaders and some funding from CARE, members have little or no access to medicines to treat the disease, Hue said.

19. (SBU) Hue and the other members of the group told the Ambassador that people living with HIV/AIDS in Vietnam need both "spiritual support" from the public and help in caring for their children. Support from Vietnam's leaders would be very useful in this. Children with HIV/AIDS in particular often suffer as they are left by their parents, who either shun them or who have themselves died of the disease. Mrs. Hue noted that her own son (who is not HIV-positive) is unable to attend preschool, although she is attempting to meet with teachers and parents to explain his condition and is hopeful that he will be able to begin soon. The group had recently organized a festival for children who are HIV-positive and assisted families to purchase materials to help children with their schoolwork. This "deeds, not words" assistance is most welcome by people living with HIV/AIDS

and their families, Hue said.

¶10. (SBU) The Ambassador's final HIV/AIDS-related site visit in Haiphong was to the Seagull Club, a drop-in and outreach center for IDUs partially funded by USAID through Family Health International (FHI). Dr. Hoang Thi Tuyet Minh, Manager of the Seagull Club, explained that the club focuses on HIV risk reduction through consultancy activities, medical checks, peer-to-peer counseling, supplying condoms and by providing and exchanging hypodermic needles. (Note: Syringe and needle access is legal in Vietnam without prescription, and, in this program, the needles are provided by the provincial health department. No USG funds are used to procure or supply syringes or needles. End note.)

¶11. (SBU) Dr. Minh said that the club is known as a place where IDUs can relax, with a large number of visitors also coming to acquire needles. She added that the club also attempts to spread knowledge about HIV/AIDS and makes referrals to the LIFE-GAP VCT center. Approximately 60 percent of the club's clients are HIV-positive. In response to the Ambassador's question about the moral hazard of providing needles to IDUs, Dr. Minh explained that the club has a "hierarchy of harm reduction." This prioritizes the encouragement of people not to use drugs, but, for those who are unable to stop injecting, the program also includes teaching methods of protecting injectors from acquiring HIV or transmitting HIV to others. Dr. Minh said she does not know how many IDUs continue to share needles, but acknowledged that an estimate of ten percent by Mr. Thao of Red Flame Tree may be accurate. Rates may be higher in distant areas and among groups that are harder to reach, such as prostitutes, she said.

¶12. (SBU) In response to the Ambassador's question, Dr. Minh said that, if the club had more funds available, it would like to carry out a drug substitution (methadone) program to help eliminate injecting and, ideally, drug use overall. They would also like to help people released from 06 centers to identify long-term jobs. The treatment these centers provide is by itself not enough, because a lack of new opportunities and the low price of heroin lead almost all former addicts to relapse. Only one of the 5,000 IDUs reached by the club had successfully quit drugs. FHI staff member Vuong Thi Huong Thu noted that the program has been effective in reducing HIV, as indicated in a recent FHI survey that showed the HIV infection rate among IDUs to be decreasing. However, both drug use and HIV incidence are moving from urban to rural areas through seasonal laborers, she added.

¶13. (SBU) Comment: Haiphong's authorities showed a positive commitment to treating people living with HIV/AIDS in their city, and we hope we can use their positive example to encourage other leaders in northern Vietnam. Nonetheless, our visits to the three organizations show an overall effort that is barely keeping its collective head above water. It appears that these groups could be further expanded or duplicated to meet very immediate needs. As more President's Emergency Plan money hopefully becomes available, we will be in a position to help improve on these existing efforts, as well as replicate them in other, less-prepared provinces in Vietnam. End Comment.

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